## EXHIBIT 153

Participant mus	t provide all	of the	information	below	in	English:
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1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:	Rosa A. Lage	Segarra,
Participant's Address:	Azucena 429	2DA Extrajas, P.R.
Participant's Email Address		J .
Name of Counsel:	,——————————————————————————————————————	
Address of Counsel:		
Email Address of Counsel:		
2. Participant's	Claim number and the nature	of Participant's Claim:
Claim Number:	NO.17BK	3283-LTS
Nature of Claim:		-
By: Aosa C 1 Le Signature	go Segano	
Print Name		RECEIVED
Title (if Participant i		AUG 0 5 2021
2 de ag Dot	D de 2021	PRIME CLERK LLC

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

De Rosa A. Lugo Segarra Calle Azurena #1529 2nda Ext. El Valle Lajas, P.R.00667

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PRIME CLERK LLC

Primer Clerk, LLC Grand Cantral Station P.O. Box 4850 New York, N.Y. 10163-4850

10163-485050

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